Number

TO A DATION AND DOWER OF ATTORNEY	ATTORNEY DOCKET NO. 10003904-1
DECLARATION AND POWER OF ATTORNEY	
EOD DATENT APPLICATION	

As a below named inventor, I hereby declare that:

AGGREGATING DEVICE COLLECTION DATA

Foreign Application(s) and/or Claim of Foreign Priority

COLINTRY

Full Name of Inventor: Susan M. Janz

Residence:

filing date before that of the application on which priority is claimed:

My residence/post office address and citizenship are as stated below next to my name;

the specification of which is attached hereto unless the following box is checked:

disclose all information which is material to patentability as defined in 37 CFR 1.56.

APPLICATION NUMBER

2725 N. Ballantyne Lane, Eagle, ID 83616

(Use Page Two For Additional Inventor(s) Signature(s))

same as residence

and was amended on

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

I hereby state that I have reviewed and understood the contents of the above-identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a

as US Application Serial No. or PCT International Application led on (if applicable).

PRIORITY CLAIMED UNDER 35 U S C 119

DATE FILED

Citizenship: U.S

January 25,2001

Page 1 of 2

			I	YES	
				YES.	NO
				123.	
rovisional Application					
hereby claim the benefit uselow:	nder Title 35, Un	ited States Code Se	ction 119(e) of any Unr	ed States provisi	onal application(s) lis
	APPLICATION	SERIAL NUMBER	FILING DATE		
I. S. Priority Claim					
hereby claim the benefit un sofar as the subject matter nanner provided by the first iformation as defined in Tit pplication and the national	er of each of the of t paragraph of Tit le 37, Code of Fe	claims of this applic tle 35, United States deral Regulations, S	etion is not disclosed in Code Section 112, I a ection 1.56(a) which oc	the prior United cknowledge the o	States application in luty to disclose mate
			STATUS (patented/pending/abandoned)		
APPLICATION SERIAL NUM	BER	FILING DATE	STATU	IS (patented/pending/ab	andoned)
APPLICATION SERIAL NUM	BER	FILING DATE	STATU	S (patented/pending/ab	andoned)
OWER OF ATTORNEY:	reby appoint the	following attorney(
OWER OF ATTORNEY: us a named inventor, I he usiness in the Patent and T Customer Send Correspondence to	reby appoint the rademark Office or Number 022	following attorney(s) and/or agent(s) to pi	osecute this app	
POWER OF ATTORNEY: As a named inventor, I he usiness in the Patent and T Customer Send Correspondence to HEWLETT-PACKARD C	reby appoint the rademark Office of Number 022	following attorney(Place Customer Number Bar Code Label here	osecute this appoint one Calls To:	
POWER OF ATTORNEY: As a named inventor, I he usiness in the Patent and T Customer Send Correspondence to	reby appoint the rademark Office of Number 022	following attorney(s) and/or agent(s) to pi Place Customer Number Bar Code Label here Direct Teleph	osecute this appoint calls To:	

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continued)

Full Name of # 2 joint inventor:	Donald J. Gathman		Citizenship:	U.S.	
Residence:	5367 N. Lawsonia Place, Boise, ID	83713			
	same as residence				
Post Office Address:	1		1/25/	0 1	
Inventor's Signature	···	Date	11221		
Full Name of # 3 joint inventor:	Burton H. Poppenga		Citizenship:	U.S.	
	1507 N. Chaucer Way, Eagle, ID	83616	_		
Residence:	same as residence				
Post Office Address:			1/25/01		
Inventor's Signature		Date	1/2 3/01		
" -					
Full Name of # 4 joint inventor			Citizenship:		
Residence:					
Post Office Address:					
Inventor's Signature		Date			
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Residence:					
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Inventor's Signature		Date			
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	or:				
Residence:					
Post Office Address:					
Inventor's Signature		Date			
			Citizenship		
Full Name of # 8 joint invent	or:		Ciuzensnip		
Residence:					
Post Office Address:					
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